

Empowering Queen Mothers and Magajias in the Fight Against HIV/AIDS

CEDPA/Ghana



1400 16th Street, NW, Suite 100
Washington, DC 20036 USA
Ph: 202-667-1142 Fax: 202-332-4496
email@cedpa.org • www.cedpa.org

Introduction

In July 2000, under the USAID funded ENABLE project, CEDPA/Ghana, in partnership with the YWCA, embarked on a program with Queen Mothers and Magajias to address the impact of HIV/AIDS in their communities. The main purpose of the Queen Mother Initiative was to sensitize Queen Mothers and Magajias on the issue of HIV/AIDS, empower them to work with their communities to reduce stigmas surrounding PLWHA, and provide HIV/AIDS prevention messages.

Ghana, unlike many other African countries has a relatively low prevalence rate of HIV/AIDS (3.6%), with an estimated 350,000 adults living with HIV/AIDS in 2000. (Ghana MOH, UNAIDS). However, a disturbing trend has been observed, that the disease in the general population is showing no signs of stabilization, and two out of every three reported cases of HIV in Ghana occur among females. One reason for the higher rates among females appears to be the migration of Ghanaian female sex workers to and from neighboring countries, particularly Ivory Coast and Togo, and the general break down of socio-cultural attitudes and values, especially those that pertain to pre-marital sex. Many young people adhere to the Ghanaian cherished cultural value of abstinence from pre-marital sexual only in principle.

Because of this context, CEDPA decided to work with women traditional leaders, Queen Mothers and Magajias in the fight against HIV/AIDS. As community leaders they command much respect and have the power to mobilize, educate and inform youth and other community women about HIV/AIDS as well as other reproductive health issues. Training in leadership skills and HIV/AIDS was given to the female leaders.

This paper describes the activities of the Queen Mothers and Magajias following the Women's Leadership Training to establish the extent to which they have followed their action plans, and to document the accomplishments they made.

Queen Mothers and Magajias

Traditionally, Queen Mothers in different communities played a variety of roles, ranging from ancestral heads equal to the chief, to respected persons within the community charged with the responsibility of performing various traditional rituals and rites. One thing common to all the Queen Mothers is that their positions are inherited and that they are recognized as leaders for other women within the community. They are the custodians of initiation rites of virgins into adulthood. Over the years however, the role of the Queen Mothers in some traditional areas has been diminished, their decision-making power has decreased, and their role has become more ceremonial, leaving them merely as objects of adornment to the chief's entourage.

Ashanti Queen Mother



In recognition of this threat to their position in society and traditional rule, the Queen Mothers of the seven regions in the southern and middle belts of Ghana, came together and formed the Queen Mothers Associations. The associations are regionally based and have enabled the Queen Mothers to demand for the restoration of their traditional roles and, be part of the decision-making process. Some chiefs are also supporting the female leaders in their bid to have representation in the National House of Chiefs. In spite of the numerous obstacles to the institution of Queen Mothers, they are still a formidable force to reckon with in Ghanaian society.

Magajias are the female leaders in Muslim communities mainly found in the urban migrant communities in the southern and northern parts of Ghana. Unlike Queen Mothers, their positions are not hereditary. They are usually selected by the members of the community, based on defined leadership qualities chosen by the communities. One such quality is an exemplary moral life, which is worthy of emulation by women in the community. Magajias are expected to be industrious, enterprising, socially active, solve marital problems, arbitrate domestic quarrels and mobilize communities for development. In recent years, the level of education has become a selection criterion. Because of the industrious nature and contribution to the development of the community, they increasingly participate in traditional council meetings where male leaders sit.

Haijia Mariama Ibrahim addressing women congregation at the Central Mosque on HIV/AIDS on 28th March 2002.



CEDPA's Queen Mothers Initiative

CEDPA, through its Women Leadership Program (WLP), embarked on a program to enhance the leadership skills of these female traditional leaders from the six regions of the country to support people living with HIV/AIDS (PLWHA). CEDPA arranged for a WLP training, which took place in Kumasi, Ghana in November, 2001. A total of 27 Queen Mothers and Magajias, and 4 representatives from other partner organizations participated. The break down of the Queen Mothers by region was as follows; 6 Queen Mothers and Magajias from the greater Accra Region; 3 from the Eastern Region; 4 from Ashanti; 4 from Brong Ahfo; 7 from Volta; 2 from the Central Region; and 1 from the National Association of Queen Mothers.

The main objectives of the training was to: (1) enhance the roles of Queen Mothers and Maagajias as community leaders through strengthening their leadership skills in regards to women's issues; (2) enable them to advocate on issues affecting women in their regions; and (3) develop action plans on how to support PLWHAs in their respective communities.



CEDPA Women Leadership Training Workshop

CEDPA, in collaboration with local partner organizations such as YMCA, YWCA, MFCS, and GNAT, also provided the Queen Mothers with opportunities to increase their knowledge on transmission and prevention of HIV/AIDS, using the 'Journey of Hope' toolkit. This opportunity allowed participants to enhance their ability to pass prevention

of HIV messages to the community, preventing unwanted teenage pregnancies, and initiating safe motherhood practices. Collaboration with the Ministry of Health has been very fruitful, as they have provided Queen Mothers with IEC materials for distribution in some instances.

Activities of Queen Mothers and Magajias

The Queen Mothers and Magajias completed training, and at the end, created action plans of activities to implement upon returning to their communities.

After activities were implemented, CEDPA conducted a study to examine the extent to which these Queen Mothers and Magajias are empowered to deal with HIV/AIDS and reproductive health issues in their communities, as well as to document and describe CEDPA's activities with the Queen Mothers and Magajias. The study targeted 12 Queen Mothers/ Magajias, and 48 community members, in four out of the ten administrative regions of Ghana. Participants were chosen on defined criteria, that is, Queen Mothers who had participated in CEDPA's sensitization programmes and community members in their communities. Below is a table showing the number of Queen Mothers and Magajias trained from each region and the breakdown of those who participated in the focus group discussions and in-depth interviews.

Table 1: Participating Respondents

Region	Number of QM and Magajias Trained	Number of QM and Magajias Interviewed	Number of FGD Participants
Greater Accra	6	5	18
Ashanti	4	3	10
Volta	7	3	10
Brong-Ahafo	4	1	10
Total	20	12	48

Source: Fayorsey 2002/CEDPA

Most of the activities listed below were done voluntarily with collaboration, in some instances, with local organizations and district assemblies of the region. Below is a list of activities by region engaged by the Queen Mothers and Magajias.

Brong-Ahafo Region Queen Mothers

After the leadership training in Kumasi, the four Queen Mothers from Brong-Ahafo region engaged in a variety of activities that focused on prevention of HIV and care of PLWHAs. The Queen Mothers in this region enjoy a genuine partnership with the chiefs, enabling them to be part of planning for the festivals and other activities within the community. They also enjoy respect and cooperation from the community members, District Assemblies and the Ministry of Health, making it easy for them to carry out their planned activities in the community.

The activities they have conducted since their leadership training are as follows:

Empowering Queen Mothers and Magajias in the Fight Against HIV/AIDS

1. Passed on the training to other Queen Mothers in the region who did not have the opportunity to attend the Kumasi workshop.
2. They are active participants in workshops on HIV prevention and counseling arranged by the District Assemblies and MOH, and are often called upon to give talks on HIV prevention during gatherings and workshops.
3. They collaborate with other stakeholders and church leaders to mobilize people to attend community discussions on HIV. Outreach programs have been formed within the communities by the Queen Mothers to distribute IEC materials and information on reproductive health and HIV/AIDS. The Ministry of Health provides them with the IEC materials.
4. They make school visits every Tuesday, holding talks with school children, and promoting the activities of peer educators (PE).
5. They are collaborating with nurses in the community and promoting community-based outreach programs for PLWHAs. They also help in identifying PLWHA, and provide assistance in care.

The Ashanti Queen Mothers

Five (including the participants from the National Association of Queen Mothers) Ashanti Queen Mothers had the opportunity to attend the Women's Leadership Training. Their roles in the community are similar to those of the Brong-Ahafa Queen Mothers, though they admit that their role has been diminished over a period of time. The formation of the Queen Mothers Associations and representation in the regional and sub-regional District Associations is helping to rejuvenate their roles in society, and more responsibilities are being passed on to them. These associations are charged with responsibilities such as organizing lectures on HIV/AIDS, reproductive health and other community development matters, of which the Queen Mothers are increasingly playing a crucial role. The activities of the Ashanti Queen Mothers post-leadership training are as follows:

1. Queen Mothers target the youth and women in their HIV/AIDS work and have formed a caucus of trainers, who have held training seminars and workshops for 42 community-based distributors (CBDs), 200 women, 155 youth, 16 chiefs, 2 paramount chiefs, and 6 church leaders.
2. They have helped financially, by lending disadvantaged women money to enable them to attend antenatal clinics, and other reproductive health services.
3. They have invited knowledgeable persons and NGOs to their forums to give lectures on HIV prevention strategies that can benefit their communities.
4. Queen Mothers have taken advantage of the Tuesday communal labor days to hold HIV education campaigns, though they admit that this has been very difficult as most people would rather be engaging in other economic activities.
5. They also work with the churches to organize crusades, where HIV information and messages are given out. IEC messages focus on stigma reduction, HIV prevention and transmission, prevention of pregnancy and promotion of virginity.

Volta Region Queen Mothers

Apart from being in charge of the traditional rites and rituals, the role of leading the women, Queen Mothers of the Volta region are considered as the gate keepers of the community, acting in collaboration with the chief as the link between the government and the community. They are usually the first to be consulted if the Central Government wants to undertake a project in their area. They also disseminate plans, programs or policies designed by the Central Government to their communities. This powerful responsibility gave the six Queen Mothers who participated in the leadership training the added advantage to carry out their activities with full, undisputed authority. The activities they have carried out so far are as follows:

1. Organized an 'AIDS March' on World AIDS Day. This march involved school children from all the schools in the town carrying placards with HIV/AIDS messages. The march ended up with a big durbar (meeting) where the Queen Mothers gave a talk on HIV/AIDS. Other mobilization activities include Queen Mothers organizing speeches on HIV/AIDS and PLWHA at festival, funeral, sports and church gatherings.
2. Queen Mothers contribute money towards a fund and frequently make donations to PLWHA, and assist in other community activities.
3. They have organized seminars and workshops, in collaboration with Population Council and MOH, to step down the training to others in the community, and generally pass out IEC materials and messages on HIV/AIDS and care for PLWHAs. Resources persons from other international organizations have been invited to update their knowledge on HIV. Teachers, opinion leaders, and other stakeholder from outside the region have been invited to help in their HIV/AIDS education campaign efforts.

Queen Mothers of the Greater Accra Region

Queen Mothers from Dodowa play a very minuscule role in the community as far as decision-making and communal affairs are concerned. They remain ceremonial heads of the female population, involving themselves in domestic arbitrations, rituals and rites of passage. Two Queen Mothers from the Greater Accra region attended the Women Leadership Training at Kumasi. They focused their activities on care and support of PLWHA, a need that was evident in this area because of the high prevalence of HIV/AIDS. Dodowa has the highest HIV prevalence in Ghana. The activities of the two Queen Mothers are as follows:

1. Sensitized 160 women and 75 men towards care and support for PLWHA;
2. Organized talks and workshops, which targeted youth and community members on issues of HIV/AIDS;
3. Assisted a family with children orphaned by HIV/AIDS to get counseling, testing and monetary assistance for drugs and care; and
4. Promotion of condom use in the community.

Magajia of the Greater Accra Region

Unlike the Queen Mothers, Magajia positions are not hereditary. Magajias are selected by community members and play the role of community moderators in matters of marriage, social disputes and community development matters. Even though they are not part of the traditional council, their work in the community is highly recognized and appreciated by the Chief and his council. Most of the Magajias are businesswomen, giving them the economic advantage of spearheading activities in their communities. Six Magajias participated in the Women Leadership Training, and below are the activities that have taken place since then:

1. They have attended other workshops organized by Family Health International, YMCA, Muslim Family Counseling Services and National Council on Women and Development (NCWD) to enhance their knowledge on HIV/AIDS.
2. They have a fund to which they contribute ₵1000- ₵4000 a month, and use the funds for funerals, weddings, assistance for the sick and more recently the funds are being used for an HIV/AIDS education campaign.
3. They have organized forums, where Sub-Magajias are invited to discuss new ideas of how to curb HIV/AIDS in their communities. There are 12 Magajias representing the various groups in the community. They are expected to carry the messages to their various social groups. They also take advantage of ceremonies and other celebrations where all genders are represented to sensitize the community to HIV/AIDS.
4. Magajias have organized seminars and workshops and hold monthly and weekly meetings in their communities. These focus on matters of sexuality, HIV and care of PLWHAs.

Major Achievements

1. Queen Mothers and Magajias feel empowered and knowledge of HIV/AIDS prevention, transmission and care for PLWHA and this has given them an edge over others in their community to deal with the menace in society. They are instrumental in spearheading and sensitizing their communities to HIV/AIDS. Their exclusive focus on women and youth is laudable. Their efforts, though small scale, are contributing to moving a community from the contemplation stage towards action in addressing the negative impact of the HIV/AIDS pandemic.
2. The Queen Mothers and Magajias are providing care and support to PLWHA thus demystifying the disease. Some of the Queen Mothers are empowering themselves by mobilizing other Queen Mothers in their traditional areas to form Associations of Queen Mothers where did not exist before.
3. The multiplying effect of the activities of these traditional women leaders, is being felt in the districts and beyond as they capitalize on every gathering like funerals and durbars to educate the people on HIV/AIDS.
4. Other organizations have also started HIV/AIDS work with Queen Mothers after realizing the potential in CEDPA's programmes.

Constraints Faced by Queen Mothers and Magajias

1. Lack of resources, both monetary and physical. The Queen Mothers generally operate in regions of poverty, and have to struggle to provide for their own families, leaving them without much to contribute to communal activities. This limits their reach as they often lack transportation, audio visual materials, commodities, and public address system, all necessary items for education and sensitization campaigns.
2. Incomplete knowledge of HIV/AIDS. Illiteracy is high among the women leaders limiting their comprehension of difficult concepts, and proper and accurate transfer of information and knowledge.
3. Lack of cooperation among some of the women leaders.
4. Lack of cooperation from stakeholders and the general assemblies affects their impact and reach in the communities.
5. Limited success in working with the youth in some areas.

Recommendations for Future Programming

1. Queen Mothers are currently spearheading the fight against HIV/AIDS in their communities and need help to:
 - Organize into formal groups in order for collaboration on development issues;
 - Strengthen their skills in the areas of advocacy, mobilization, organizing, proposal writing and fundraising;
 - Develop their skills in the area of care and support; and
 - Develop their training skills.
2. Future programs should also target male community members.
3. Involvement of PLWHAs in HIV/AIDS education campaigns would help in reducing stigma.
4. Inclusion of trained counselors in future programming for emotional support of PLWHAs.
5. Support programs for the growing number of orphans and vulnerable children will be essential.
6. Training in youth development and behavior dynamics is necessary for the Queen Mothers and Magajias to better serve the youth in their communities. Skill training for out-of-school youth, in the area of income generation, will be essential.
7. Establishing similar HIV/AIDS prevention activities in the northern part of Ghana.